## BEST AVAILABLE COPY

barbara kampusu Medonof Storio Do	05-3631	PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2001							09/980752					
Victors	(203)		·		FILED - PART I (Column 1) (Column 2)			SMALI TYPE	ENT	TTY I	OR	OTHER SMALL		
-	TOTAL CLAIMS							RAT	E	FEE		RATE	FEE	
	FO	PR	NUMBER	FILED	NUMBER EXTRA		BASIC	FEE		OR	Basic Fee	890		
	то	TAL CHARGEA	BLE CLAIMS	23 minus 20=		<del>• 3</del>		X\$.9	=		OR	X\$18=	54	
	IND	EPENDENT ¢	LAIMS	10 minus 3 =		• 7		X42	_		OR	X84=	588	
	MU	ILTIPLE DEPEN	IDENT CLAIM PI	RESENT				+140				.000	000	
	* if	If the difference in column 1 is less than zero, enter "0" in column 2									ÓR	+280=	1 000	
	]	CLAIMS AS AMENDED - PART II						TOTA	"L		OR	TOTAL	1532	
	4	(Column 1) (Column 2) (Column 3)						OTHER/THAN SMALL ENTITY OR SMALL ENTITY						
	AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVK PAID	BER OUSLY	PRESENT EXTRA	RAT	E TI	ADDI- IONAL FEE		RATE .	ADDI- TIONAL FEE	
	N N	Total	· 23	Minus	* a	3	=	X\$ 9	=		OR	X\$18=		
	AME	Independent	. 10	Minus	***	D	= /-	X42:	-		OR	X84=		
		FIRST PRESE	NTATION OF MI	JLTIPLE DEI	PENDENT	CLAIM		+140	_		OR	+280=		
Ì	3			(Column 2) (Column 3)			TO			OR	TOTAL			
	}		(Column 1)				ADDIT. F	EE L		JON,	ADDIT. FEE			
	AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVK PAID	EST BER DUSLY	PRESENT EXTRA	RATI	Ξ <b> </b> ΤΙ	ADDI- ONAL FEE		RATE	ADDI- TIONAL FEE	
I	NON NO	Total	*	Minus	**		=	X\$ 9	-	•	OR	X\$18=	•	
	AME	Independent	•	Minus	***		-	X42:	. 7		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							A140	╁		Un	1380-		
ĺ		•	* <b>2</b>				101			OR	+280= TOTAL			
l			(Column 1)	0.60-0.80-0.			ADDIT. F			OR	ADDIT. FEE			
				(Colur		(Column 3)								
	AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA	RATE	TIC	ODI- ONAL FEE		RATE	ADDI- TIONAL FEE	
	N	Total	*	Minus	##		-	X\$ 9:	. [		OR	X\$18=		
	A PE	Independent	*	Minus	***			X42=	+			X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								╬		OR			
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							+140=			OR	+280=		
	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20. ****If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."							ADDIT. F				TOTAL ADDIT. FEE		
	1	The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												
	FORM PTO-875 (Rev. 8/01)													